

**PART B - FEE(S) TRANSMITTAL**

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**FEB 22 2005**

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7590

11/16/2004

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02/24/2005 LW/ODIN/HE 0000029 09964178

01 FC:2501	700.00 OP
02 FC:1504	300.00 OP
03 FC:8001	15.00 OP

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
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09/964,178

09/25/2001

Robert Raffa

TUN-566US

9598

TITLE OF INVENTION: ANALGESIC AND GLUCOSAMINE COMPOSITIONS

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1370 700	\$300	\$1670 1000	02/16/2005
EXAMINER		ART UNIT	CLASS-SUBCLASS		
MAIER, LEIGH C		1623	514-062000	\$1015	

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.

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2. For printing on the patent front page, list

(1) the names of up to 3 registered patent attorneys or agents OR, alternatively,

(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1. RatnerPrestia

2. \_\_\_\_\_

3. \_\_\_\_\_

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

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(B) RESIDENCE: (CITY and STATE OR COUNTRY)

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 Publication Fee (No small entity discount permitted)  
 Advance Order - # of Copies 3

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 b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

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Authorized Signature

Date February 15, 2005

Typed or printed name Robert L. Andersen

Registration No. 25,771

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## TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

Total Number of Pages in This Submission 4 pages

Application Number	09/964,178
Filing Date	September 25, 2001
First Named Inventor	Robert B. Raffa
Art Unit	1623
Examiner Name	Leigh C. Maier
Attorney Docket No.	TUNA-566US

### ENCLOSURES (Check all that apply)

<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation, Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): PTOL-85 Part B - Fee Transmittal; PTO Form-2038; Post Card
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**Remarks:**

### SIGNATURE OF APPLICANT, ATTORNEY OR AGENT

Firm or Individual Name Signature	Robert L. Andersen <i>RL Andersen</i>	Registration No. (Attorney/Agent)	25,771
Date	February 15, 2005		

### CERTIFICATE OF TRANSMISSION / MAILING

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Typed or printed name	Patricia Boccella		
Signature	<i>Patricia C. Boccella</i>	Date	February 15, 2005

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